



VILLAGE OF ELK GROVE VILLAGE
OFFICE OF THE VILLAGE CLERK
901 Wellington Avenue
Elk Grove Village, IL 60007
847/357-4040 847/357-4008 fax
REQUEST FOR PRODUCTION OF RECORDS

(Office Use Only) _____
TO: _____ Name/Department
Due Date: _____
Request Received by _____

Please *type or print* the information on this form.

DATE: _____

Records Requested (be specific): _____

Check which of the following apply:

- _____ I will inspect these records at the Village's office.
- _____ I request copies and agree to pay \$0.25 per page (per side) \$0.50 per page for microfilm copies or computer printouts. Anticipated cost in excess of \$10.00 will require a deposit in such amount as is deemed appropriate by the Village Clerk.
- _____ Certification of documents is an additional \$0.50 per document.

A response to your request will be made within 7 working days of the receipt of this request.

I warrant and represent that the records requested will not be used for purpose of furthering any commercial purpose. _____

Signature of Requestor

NAME OF REQUESTOR (please print) ADDRESS PHONE

ACTION TAKEN BY THE VILLAGE WITH REGARDS TO THIS REQUEST:

- | | |
|--|--|
| _____ COMPLIED WITH REQUEST | _____ REQUEST DENIED |
| _____ Unable to Comply within seven (7) days: | _____ Disclosure prohibited by State/Federal Law |
| _____ Records kept in another location | _____ Disclosure invasion of privacy |
| _____ Volume of Records/Extensive Search | _____ Commercial purpose |
| _____ Cannot locate/search continues | _____ Request too broad, need more information |
| _____ May be exempt/need more time | _____ Exempt from Act |
| _____ Need consultation with other entity | _____ No such records exist |

Representative of the Village who is responsible for decision relative to this request Title Date

No. of copies _____ Copying fee \$ _____ Certification fee \$ _____ Total \$ _____

I acknowledge that I have received access to records as requested.

SIGNATURE

DATE

APPEAL

You are hereby notified that you have the right to appeal the decision herein to the Village Manager of the Village of Elk Grove Village who will make a decision to either affirm the denial of disclosure or to allow disclosure within seven (7) working days after notice of an Appeal is filed. Such notice of Appeal must be filed within seven (7) working days of notification of denial. If the decision to deny the request is affirmed by the Village Manager, you have the right to appeal this decision to the Circuit Court of Cook County. **YOUR SIGNATURE BELOW WILL BE DEEMED AN APPEAL.**

SIGNATURE OF REQUESTOR

DATE
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